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Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or	rate level produced by rate revision effective	10-15-07 NB & 11-15-07 RN
(1)	(2) Annual Premium	(3) Percent Change (<u>+ or -)**</u>
<u>Coverage</u>	<u>Volume (Illinois)*</u>	Change (+ or -)
Automobile Liability Private Passenger Commercial		
 Automobile Physical Damage Private Passenger Comme 	ercial	
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	\$1,788,903.	-2.5%
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain ten	ritory (territories) or certain classes? If so, specify	: <u>No</u>
Brief description of filing. (If filing to ISO Rate, Rule and Form changes CL-2006-OTR01, RP-2005-RML05	follows rates of an advisory organization, specification approved under CF-2006-RLA1, CF-2006-REQ1 and ML-2006-RLA1	y organization): We are filing to adopt , CF-2006-REQRU, CL-2006OTF01,
	- 100 - 100	
*Adjusted to reflect all prior rate chat **Change in Company's premium le	anges. evel which will result from application of new rate	s.
	Alliad P.	&C Insurance Company
		Name of Company
	Shirley A.	Collins, Sr. Filing Analyst
		Official – Title



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Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate leve	el produced by rate revision effective	10-15-07 NB & 11-15-07 RN
(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
1 Automobile Liebility Private	 -	
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage		
D 1 (D) (D) (D) (D)		
Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		-
7. Surety		
8. Boiler and Machinery		
9. Fire	\$1,725,696	-0.9%
10. Extended Coverage	V 1,1 20,000.	
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		-
Does filing only apply to certain territory (te	rritories) or certain classes? If so, specify	y: <u>No</u>
Brief description of filing. (If filing follows	rates of an advisory organization, specif	y organization): We are filing to adopt
ISO Rate, Rule and Form changes approve	ed under CF-2006-RLA1, CF-2006-REQ	1, CF-2006-REQRU, CL-2006OTF01,
CL-2006-OTR01, RP-2005-RML05 and MI	2006-RLA1	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level whi	ch will result from application of new rate	es.
	ΔΜΩ	O Insurance Company
	AIVIO	Name of Company
		, ·
	Shirley A	. Collins, Sr. Filing Analyst
		Official – Title



SUMMARY SHEET

	Change in Company's revision effective	premium or rate level produced by rate September 1, 2007	
	revision effective	September 1, 2007	
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+or-)**
1.	Automobile Liability		
	Private Passenger	<u>_</u>	
	Commercial		
2.	Automobile Physical	-	
	Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$682	-19.54%
10.	Extended Coverage	\$397_	-4.99%
11.			
12.			14.000
13.		\$400,338	
14.	•		
15.			
	Line of Insurance		
		erritory (territories) or certain classes	? If so, specify:
٧o, s	statewide.		
Brie.	description of filing. (If fili	ng follows rates of an advisory organiz	ation, specify organization):
Ado	pt ISO Loss Costs and revise	company loss cost multipliers. (CF	-2006-KLAL)
* A.	djusted to reflect all prior rate	ahangas	
	hange in Company's premiun		
	esult from application of new		
1	- -	American Fire	and Casualty Company
	DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR	E Nam	e of Company
	STATE OF ILLINOIS/IDEPH	Joe Allen. Pro	oduct Staff Underwriter
		Of	ficial - Title
	JUN 2 1 2007		

SPRINGFIELD, ILLINOIS

SUMMARY SHEET

	Change in Company's prevision effective	September 1, 2007	DIVISION OF INSUITED ILLINOIS/
	(1)	(2) Annual Premium	$\int (3) JUN 21_{2007}$
	<u>Coverage</u>	Volume (Illinois)*	Percent Change (Spp.)** Change (Spp.)**
1.	Automobile Liability		-S, ILLING
	Private Passenger		
	Commercial		
2.	Automobile Physical		
	Damage		
	Private Passenger		
	Commercial (6)		12.000/
3.	Liability Other Than Auto	\$124,951	+2.00%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
-	Fire		
10.	-		
11.	Inland Marine		
12.	Homeowners	Ø1 171 701	+1.70%
13.		\$1,171,781	+1.7078
14.	Crop Hail		•
15.	Other Line of Insurance		
	Line of insurance		
Doe	s filing only apply to certain te	rritory (territories) or certain classes?	If so, specify:
No,	statewide.		
Brie	f description of filing. (If filing.	ng follows rates of an advisory organiza	tion, specify organization):
	2	ry definitions. Revise payroll limitation	n. Revise loss cost
mult	ilpliers.		
* *	djusted to reflect all prior rate	changes	
	ajusted to reflect all prior rate Change in Company's premium		
	nange in Company's premium result from application of new		
I	esun nom apprication of new		and Casualty Company
			of Company
			luct Staff Underwriter
			icial - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate lev	vel produced by rate revision effective	11/15/2007
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire	\$28,992,864.	
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (t	erritories) or certain classes? If so, speci	fy: All classes and codes affected.
Brief description of filing. (If filing follows Basic Group I Specific Class multipliers	s rates of an advisory organization, spe	cify organization): We are revising our
amended due to the Terrorism Back C	out Factor being applied. The Basic (Group II Specific Mulitoliers are being
amended.	tat radior boing apprior. The Badio	Stoop is Option, and an arrangement of the stoop in the s
unerrood.		
*Adjusted to reflect all prior rate changes. **Change in Company's premium level when the company level when the	nich will result from application of new rat	es.
	Th- 0:-	singeti legurance Company
	ine Cin	cinnati Insurance Company Name of Company
		Gaino or Company
	Connie Peter	tonjes - Senior Filings Specialist
		Official – Title



ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	vel produced by rate revision effective	06/01/2007
(1) <u>Coverage</u>	(2) Annual Premium <u>Votume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
 Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto Burglary and Theft Glass Fidelity 		
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail	210,178	-10.0%
15. Other <u>Liability</u> Line of Insurance	737,573 territories) or certain classes? If so, specify	-9.2% /: No.
Brief description of filing. (If filing follows in With this filing, Continental Casualty Come Program. The changes are itemized by continents.)	rates of an advisory organization, specify on pany ("CNA") proposes a number of rate/loverage in the enclosed actuarial memora	organization):rule changes to its Dental Professional
*Adjusted to reflect all prior rate changes. **Change in Company's premium level w	hich will result from application of new rate	
DIVISION OF INSURATION OF INSU	ANCE FPR	ental Casualty Company Name of Company Shner, Senior Vice President Official – Title

SPRINGFIELD, ILLINOIS

SUMMARY SHEET

		premium or rate level produced by rate	e
	revision effective	September 1, 2007	
	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+or-)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$37,565	-16.18%
10.	Extended Coverage	\$25,473	-14.31%
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$823,853	-11.33%
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	s filing only apply to certain te statewide.	erritory (territories) or certain classes	? If so, specify:
Brie:	f description of filing. (If filir pt ISO Loss Costs and revise o	ng follows rates of an advisory organizeompany loss cost multipliers.	zation, specify organization):
** C	djusted to reflect all prior rate hange in Company's premium esult from application of new	level which will rates.	alty Insurance Company
			o of Company

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

JUN 2 1 2007

SPRINGFIELD, ILLINOIS

Name of Company

Joe Allen, Product Staff Underwriter

Official - Title

Form (I	XF-3)
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SUMMARY SHEET

DIVISION OF THE
DIVISION OF INSURANCE
STATE OF ILLINOIS/IDEPR
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JUN 2 1 2007

	Change in Company's p	premium or rate level produced by rate	
	revision effective	September 1, 2007	SPRINGEIGIO
			SPRINGFIELD, ILLINOIS
	(1)	(2)	$(\overline{3})$
		Annual Premium	Percent
	Coverage	Volume (Illinois)*	Change (+or-)**
			·
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical		
۷.	Damage		
	Private Passenger		
	~ '1	**	
_	Commercial C6L	0250.056	10.500/
3.	Liability Other Than Auto	\$350,056	+8.58%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$1,143,971	+6.86%
14.	Crop Hail	Ψ1,113,271	
	-		
15.	Other		
	Line of Insurance		
		erritory (territories) or certain classes?	If so, specify:
No, 5	statewide.		
		ng follows rates of an advisory organizat	
Ado	pt ISO Loss Costs, ILF, territo	ry definitions. Revise payroll limitation	n. Revise loss cost
mult	ipliers.		
* A	djusted to reflect all prior rate	changes.	
	hange in Company's premium		
	esult from application of new		
	• •		ty Insurance Company
			of Company
			luct Staff Underwriter
			cial - Title
		Ozn.	

SUMMARY SHEET

	Change in Company's p	premium or rate level produced by rate	e
	revision effective	September 1, 2007	
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+or-)**</u>
1.	Automobile Liability		
• •	Private Passenger		
	Commercial		
2.	Automobile Physical		
	Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	\$17,959	-16.92%
0.	Extended Coverage	\$10,368	-15.59%
1.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril	\$1,277,922	-18.67%
١4.	Crop Hail		
5.	Other		
	Line of Insurance		
)oes	s filing only apply to certain te	erritory (territories) or certain classes	? If so, specify:
	statewide.	,	
			
Brie	f description of filing. (If filing.	ng follows rates of an advisory organiz	zation, specify organization):
do	pt ISO Loss Costs and revise of	company loss cost multipliers. (C	F-2006-RLAD
	djusted to reflect all prior rate		
	change in Company's premium		
r	esult from application of new		
			can Insurance Company
	DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR	I	ne of Company
	STATE OF ILLINOIS/IDFPH	L Joe Allen. Pr	oduct Staff Underwriter

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JUN 2 1 2007

SPRINGFIELD, ILLINOIS

Official - Title

Form	(RF	-3)

SUMMARY SHEET

Form	(RF-3)	SUMMARY SHEET		DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR PECEIVED
	Change in Company's prevision effective	oremium or rate level produce September 1, 2007	d by rate	JUN 2 1 2007
	(1)	(2) Annual Premium	L	SPRINGFIELD, ILLINOIS
	Coverage	Volume (Illinois)*	<u>Ch</u>	nange (+or-)**
1.	Automobile Liability			
	Private Passenger			
	Commercial			
2.	Automobile Physical			
	Damage			
	Private Passenger			
	Commercial CGL			
3.	Liability Other Than Auto	\$332,46	4	+0.47%
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
10.	Extended Coverage			
11.	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril	\$1,484,11	<u> </u>	+4.21%
14.	Crop Hail	-		
15.	Other	•		
	Line of Insurance			
_			1 0 16	
Does filing only apply to certain territory (territories) or certain classes? If so, specify:				
No, s	statewide.			
Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopt ISO Loss Costs, ILF, territory definitions. Revise payroll limitation. Revise loss cost				
multilpliers.				
muit	iphers.			
* ^ ~	ljusted to reflect all prior rate	changes		
** Change in Company's premium level which will				
result from application of new rates.				
4.	Tour approace or now		t American Insura	ance Company
Name of Company				
		Joe A	Allen, Product Sta	
			Official - T	